Sagittal Band Rupture with Extensor Tendon Dislocation Due to Low Energy Trauma: A Case Report

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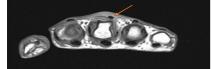
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INTRODUCTION:

Sagittal band injury often caused by a high energy trauma and less often by a low energy trauma. As one of the most important parts in stabilizing extensor tendons, a rupture of the sagittal band can lead to subluxation or dislocation of the extensor tendon. Chronic or delayed presentation of this injury along with extensor digitorum communis dislocation require a surgical stabilization.

REPORT:

A 46-year-old man had a continuous and painful clicking sensation while flexing his MCP joint, which started after he tried to catch a falling heavy tray four weeks prior to being admitted to the hospital. Upon physical examination, there was swelling and tenderness over the third metacarpal head, and an extensor digitorum communis (EDC) tendon dislocation was found on the ulnar side of the middle finger during active MCP joint flexion. Radiographs showed no fractures or joint dislocations, and an MRI revealed tenosynovitis and strain of the EDC at the base metacarpal digit III manus dextra, along with joint effusion at the MCP joint and subluxation of the extensor tendon.



The MCP joint capsule was sutured, and the extensor tendon was placed in its midline position. During surgery, fibrous tissue and hematoma were found on the radial side of the common extensor tendon of the middle finger, and an ulnarwards deviation was observed in the extensor tendon. One month after surgery, the patient experienced some pain and swelling at the surgery site, but could still flex and extend his fingers without any recurrence of extensor subluxation. The QuickDASH Outcome Measure was evaluated and scored 31.8, and after three

months of follow-up, the QuickDASH score was 16.5.



Figure 1: MRI study demonstrating an extensor tendon subluxation.

Figure 2: Radial sagittal band repair followed by anchor suture

CONCLUSION:

Sagittal band rupture with extensor tendon dislocation is a rare injury that can occur due to low energy trauma. The case report presented highlights the importance of early diagnosis and prompt treatment of this injury to avoid longterm complications such as chronic pain, weakness, and deformity.

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